FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200000578 (4)

IMSCO INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
4325 STEED TERR. STE 113 WINTER PARK F 3 2792 US	P. O. BOX 2146 GOLDENROD FL 32733-2146 US

FILED May 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4325 STEED TERR. P. O. BOX 2146			F CERTIFOR THE NAME THE SOUR BOTH BOTH COUNTER	F TRONSONE UND TRIES TIMES AND CONTROLLED FOR BRITING				
STE 113 WINTER PARK F \$2792		GOLDENROD FL 32733-2 US	GOLDENROD FL 32733-2146		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE		
US	of Page 1015	00	00		3. Date Incorporated or Qualified 10/29/1992			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
н		26			59-3154073	Not Applicab		
Suite, Apt. #, etc. 22 City & State 23		Suite, Apt. #, etc. 27 City & State 28		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
						Zip	Country	Ζφ
4	25	29	30			Yes No		
	9. Name and Address of Curre	nt Hegistered Agent	8	1 Name	10. Name and Address of New Registered	Agent		
THAVARAJAH, IMAYAN				1 Mariic				
	25 STEED TERRACE		8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)			
WIIW	NTER PARK FL 32792		8:	3				
					_			
			84	4 City	FL	85 Zip Code		
44 Purcuant	to the provisions of Sections (47.0)	02 and 607 1508 Florida Statut	es the abo	L	progration submits this statement for the purpose of	of changing its registere		
12.		ND DIRECTORS	13.		curred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PTS	☐ DELFTE	1.1 TITLE			Change Addition		
NAME	THAVARAJAH, IMAYAN		1.2 NAME					
STREET ADDRESS	4325 STEED TERRACE			ET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL	DELETE	1.4 City - 2.1 Title			Change Addition		
TITLE NAME		LJ beene	2.1 MILE 2.2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP			2 4 CITY					
TITLE		☐ DELFTE	3 1 TITLE			Change Additi		
NAME			3.2 NAME	<u>.</u>				
STREET ADDRESS			3.3 STRE	FT ADDRESS				
CITY-ST-ZIP			3 4. CITY	- ST - ZIP				
TITLE		DELETE	4.1 TIFLE	1		Change Addition		
NAME			4. 2 NAM	1				
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 CITY-			Change Addition		
TITLE			5 1 TITLE			FT counts FT whether		
NAME CARETA ADDOLCC			5.2 NAME			14,00		
STREET ADDRESS				ET ADDRESS		75/9		
CITY-ST-ZIP TITLE	 	DELETE	5.4 CITY- 6.1 TITLE			Change Addition		
NAME			6.2 NAME		2000025379	92		
STREET ADDRESS				ET ADORESS	20000253 79 -05/28/98010100	134		
CITY_ST_7P				- ST - 71P	***150.00			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

1/26/00